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	Approved for use through 7/31/2000	E AND ARE	
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U.S. Partent most 1	Indemark Office; U.S. DEPARTMENT	7 ~ # ~~~~~	-

PATENT	T APPLICATION	FEE DETE	RMINATIO	N RECORD		age a valid OMB control number. Non or Docket Number 917 428	
С	LAIMS AS FILED - (Column 1)		kumn 2)	SMALL ENTITY	oR	OTHER THAN SMALL ENTITY	
FOR	NUMBER FILED	NUMBE	ER EDITRA	RATE FE		RATE FEE	
BASIC FEE (37 CFR 1.18(4))					OR	5	
TOTAL CLAIMS (ST CFR 1.18(c))) M saturas 20		7	x /	OR OR	x1	
INDEPENDENT CLAIMS (37 CFR 1.16(b))	Q minus 3		7	x1	or or	1.7.	
MULTIPLE DEPENDENT C	LAIM PRESENT (57	CFR 1,16(0)		+:	OR	1.	
* if the difference in solum	n 1 is loss than zero, ent	er "O" in column ;	2.	TOTAL		TOTAL	
CLAIMS AS AMENDED - PART II							
	Calumn 1)	(Column 2)	(Cotumn 3)	SMALL ENTITY	, OR	OTHER THAN SMALL ENTITY	
<	CLAIMS EMADNING AFTER ENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE ADI	IAL	RATE ADDI- TIONAL FEE	
Z Total	O Minus	20		x = /-	71 or	,50.	
Total (27 cra 1.16(ng -) Lindspendent (27 cra 1.16(ng -)	Minus	73	•	Z-		.200 201	
	N OF MULTIPLE DEPONDE	NT CLAIM (37 CF	R 1.16(4)	., . /	08	.360.	
2000				TOTAL ADD'L FEE	OR	TOTAL ADDITE CONT	
	Cotumn 1)	(Column 2)	(Column 3)				
00 RI	CLAIMS EMAINING AFTER IENDMENT	HIGHEST NUMBER PREVIOUSLY PAID-FOR	PRESENT EXTRA	RATE ADI	USL	RATE ADDI- TIONAL FEE	
Total '	Minus	30	•	x	7 ,	**	
AND Total CONTRACT CO	Minus	- 1	• /	x 5		1 1	
FIRST PRESENTATIO	N OF MULTIPLE DEPONDE	NT GLASS (37 OF	R 1.16(4)	+1	OR		
1 16.00				TOTAL ADDIL FEE	OR	TOTAL ADO'L FEE	
01) 1 Ld	Column 1)	(Column 2)	(Column 3)				
O Total Ab	CLAIMS EMAINING AFTER EMEMENT	HIGHEST HUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE ADI	OF- HAL E	RATE ADDI- TIONAL J. FEE	
Total (* gross 1.1809)	Minus	30		xa	OR	xs	
Z Independent cr crx 1.1800	Mirrus	73.		x 5 a	OR	x	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d))			•5 a	OR	+ 2 0,		
				ADO'L REE	OR	TOTAL ADDL FEE	
" If the entry in column 1 is less than the entry in column 2, write "O" in column 3. " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or independent) is the Highest number found in the appropriate box in column 1.							

This collection of information is required by 37 GFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 GFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. There will vary depending upon the individual case. Any comments on the amount of time you require to complete this form undoor suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Petent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.